

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.



PLAINTIFF United States of America	COURT CASE NUMBER 05-1849 JH ED
DEFENDANT Dana Jarvis, et al.	TYPE OF PROCESS DISTRICT COURT DISTRICT OF NEW MEXICO Lis Pendens
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 00 SEP 20 PM 3:00 CLERK ALBUQUERQUE

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Stephen R. Kotz Assistant United States Attorney P.O. Box 607 Albuquerque, NM 87103	Number of process to be served with this Form - 285 Number of parties to be served in this case Check for service on U.S.A.	2006 AUG 32 AM 7:02 U.S. MARSHALS SERVICE DISTRICT OF NEW MEXICO
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SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)
Fold

1. Please file the attached Lis Pendens with the Sandoval County Assessors Office. Return completed copies for filing.

Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (505) 346-7274	2006 SEP 14 AM 7:02 U.S. MARSHALS SERVICE DISTRICT OF NEW MEXICO
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No	District to Serve No	Signature of Authorized U.S. Deputy or Clerk 	Date 9/1/06
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)					
Name and title of individual served (if not shown above)				A person of suitable age and discretion then residing in the defendant's usual place of abode. <input type="checkbox"/>	
Address (complete only if different than shown above)				Date of Service 9/8/06	Time am pm
Signature of U.S. Marshal or Deputy 					
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owned to U.S. Marshal or Amount of Fund

REMARKS: